

<i>Interview Summary</i>	Application No.	Applicant(s)	
	10/593,374	EOM, JUNHYOUNG	
	Examiner	Art Unit	
	ANDARGIE M. AYCHILLHUM	2841	

All participants (applicant, applicant's representative, PTO personnel):

(1) ANDARGIE M. AYCHILLHUM. (3) \_\_\_\_\_.

(2) RENNER JOHN ( Req. NO. 19097). (4) \_\_\_\_\_.

Date of Interview: February 5<sup>th</sup> 2008.

Type: a) ☒ Telephonic b) ☐ Video Conference  
 c) ☐ Personal [copy given to: 1) ☐ applicant 2) ☐ applicant's representative]

Exhibit shown or demonstration conducted: d) ☐ Yes e) ☒ No.  
 If Yes, brief description: \_\_\_\_\_.

Claim(s) discussed: 1.

Identification of prior art discussed: Yes.

Agreement with respect to the claims f) ☐ was reached. g) ☒ was not reached. h) ☐ N/A.

Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: The Applicant's Attorney called to discuss the rejection of claim 1. Applicant explained how the prior art of Maue et al. (US 5,478,244) is not reading on the claimed limitation, specifically pointed out that it is the unique configuration of the PCB, that is the upper PCB 10 directly connects with the lower PCB 20 through the lower second PCBs directly". Decision about the allowability will be taken upon receipt of the response.

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER OF ONE MONTH OR THIRTY DAYS FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

\_\_\_\_\_  
 Examiner's signature, if required